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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day 0920-12IW]

Proposed Data Collections Submitted for
Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-7570 and send comments to Ron Otten, at CDC, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an email to omb@cdc.gov.

invited (a) Whether Comments are on: the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d)

ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

## Proposed Project

Fetal Alcohol Spectrum Disorders Regional Training Centers
- New - National Center on Birth Defects and Developmental
Disabilities (NCBDDD), Centers for Disease Control and
Prevention (CDC).

## Background and Brief Description

This program will collect program evaluation data from participants of trainings for medical and allied health students and practitioners regarding fetal alcohol spectrum disorders (FASDs) conducted by the FASD Regional Training Centers (RTCs) through a cooperative agreement with the CDC.

Prenatal exposure to alcohol is a leading preventable cause of birth defects and developmental disabilities. The term fetal alcohol spectrum disorders (FASDs) describes the full continuum of effects that can occur in an individual exposed to alcohol in utero. These effects include physical, mental, behavioral, and learning disabilities. All of these effects have lifelong implications.

Health care professionals play a crucial role in identifying women at risk for an alcohol-exposed pregnancy and in identifying effects of prenatal alcohol exposure in individuals. However, despite the data regarding alcohol consumption among women of childbearing age and the estimated prevalence of FASDs, screening for alcohol use among female patients of childbearing age and screening for FASDs are not yet common standards of care. In addition, it is known from surveys of multiple provider types that although they might be familiar with the teratology and clinical presentation of FASDs, they report feeling less prepared to identify for referral or to diagnose a child and even less prepared to manage and coordinate the treatment of children with FASDs. Similarly, among obstetrician-gynecologists, although almost all report asking their patients about alcohol use during pregnancy, few use a proper screening tool for alcohol assessment.

There is a need for the training of medical and allied health students and practitioners in the prevention, management, and identification of FASDs, hence the recommendations that have been put forward in this area. As part of the fiscal year 2002 appropriations funding legislation, the U.S. Congress mandated that the CDC, acting through the NCBDDD Fetal Alcohol Syndrome (FAS) Prevention Team and in coordination with the National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect

(NTFFAS/FAE), other federally funded FAS programs, and appropriate nongovernmental organizations (NGOs), would (1) develop guidelines for the diagnosis of FAS and other negative birth outcomes resulting from prenatal exposure to alcohol; (2) incorporate these quidelines into curricula for medical and allied health students and practitioners, and seek to have them fully recognized by professional organizations and accrediting boards; and (3) disseminate curricula to and provide training for medical and allied health students and practitioners regarding these guidelines. As part of CDC's response to this mandate, a total of seven FASD RTCs have been established since 2002 to train medical and allied health students and professionals regarding the prevention, identification, and treatment of FAS and related disorders, now known collectively as FASDs. The FASD RTCs have developed and implemented ongoing FASD training programs and courses throughout their regions reaching medical and allied health professionals and students. Trainings are delivered in academic settings (medical and allied health schools) and via continuing education events for practicing medical and allied health professionals. Training delivery varies by RTC depending on the target audience and setting. Examples include grand round presentations, a five-week online course for practicing social work, nursing, and substance abuse professionals, a two-hour face-to-face training for

nursing and social work students, and a train-the-trainer model with 1- to 5-day trainings for trainers who then deliver at least two trainings per year to students and professionals.

CDC requests OMB approval to collect program evaluation information from training participants over a three-year period. Training participants will be completing program evaluation forms to provide information on whether the training met the educational goals. The information will be used to improve future trainings.

It is estimated that 15,640 participants will be trained each year, for a total estimated burden of 5,316 hours (2,658 hours annually). There are no costs to respondents other than their time.

Estimated Annualized Burden Hours

Type of Respondents	Organization	Form Name	No. of Respondents	No. of Responses per Respondent	Avg. Burden/ Response	Total Burden (in hours)
Medical and allied health	Artic RTC	Foundations Pre	30	1	15/60	8
professionals and students		Foundations Post	30	1	15/60	8
		Foundations Follow-Up	18	1	10/60	3
		FASD 201 Pre	30	1	10/60	5
		FASD 201 Post	30	1	10/60	5
		FASD 201 Follow-Up	18	1	10/60	3
		Intro to FASDs Pre	80	1	15/60	20
		Intro to FASDs Post	80	1	15/60	20
	A THE STREET	Intro to	48	1	10/60	8

Artic RTC

		FASDs Follow-				
		Up				
		Train-the-	25	1	15/60	6
		Trainer Pre		_	127,00	
		Train-the-	25	1	15/60	6
		Trainer Post				
		Train-the-	15	1	15/60	4
		Trainer			,	
		Follow-Up				
		Online I Pre	100	1	10/60	17
		Online I Post	100	1	10/60	17
		Online II Pre	100	1	10/60	17
		Online II	100	1	10/60	17
		Post				
		Online III	100	1	10/60	17
		Pre				
		Online III	100	1	10/60	17
		Post				
		Classroom	150	1	6/60	15
		Post				
		Special Event	150	1	6/60	15
		Post				
Nursing	Frontier RTC	Pre-test	410	1	15/60	103
Students		Post-test	410	1	15/60	103
		Follow-up	410	1	15/60	103
Social Work		Pre-test	410	1	15/60	103
Students		Post-test	410	1	15/60	103
		Follow-up	410	1	15/60	103
Allied Health		Pre-test	200	1	15/60	50
Practitioners		Post-test	200	1	15/60	50
		Follow-up	200	1	15/60	50
Training of		Pre-test	100	1	15/60	25
Trainers		Post-test	100	1	15/60	25
Participants		Follow-up	100	1	15/60	25
Academic		Pre-test	150	1	15/60	38
Faculty/		Post-test	150	1	15/60	38
Students		Follow-up	150	1	15/60	38
Online	-		1.50		15/60	1.0
Practitioner		Pre-test	160	1	15/60	40
Online		Post-test	160	1	15/60	40
M. 1' 1	C T . 1	Follow-up	160	1	15/60	40
Medical and	Great Lakes	Foundations/	450	1	5/60	38
Allied Health Care Providers	RTC	QUALTRICS				
and Students		online Pre	450	1	10/60	75
and Scudents		Foundations/ QUALTRICS	450	1	10/60	/5
Medical Students		online Post				
and Providers		Foundations/	310	1	5/60	26
CIIC IIOVICED		QUALTRICS	310		3/00	20
		online				
	<u> </u>	OTITITIE				

	Great Lakes	6-Mo F/U				
Medical and	RTC	SBI/QUALTRICS	120	1	8/60	16
Allied Health		online Pre				
Care Providers		SBI/QUALTRICS	120	1	13/60	26
and Students		online Post	120	_	13/00	20
		SBI/	108	1	8/60	14
		QUALTRICS	100	-	0,00	1
		online 6-Mo				
		Follow-up				
		ID and	270	1	8/60	36
		Treatment of	270	1	8/60	36
		FASD/				
		QUALTRICS				
		online Pre	070	1	12/60	F.0
		ID and	270	1	13/60	59
		Treatment of				
		FASD/				
		QUALTRICS				
		online Post				
		ID and	258	1	8/60	34
		Treatment of				
		FASD/				
		QUALTRICS				
		online 6-Mo				
		Follow-up				
		FASD/	220	1	15/60	55
		QUALTRICS				
		online				
		Comprehensive				
		Pre				
		FASD/	220	1	20/60	73
		QUALTRICS				
		online				
		Comprehensive				
		Post				
		FASD/	204	1	15/60	51
		QUALTRICS				
		online				
		Comprehensive				
		6-Mo Follow-				
		up				
Physicians and	1	Clinical	25	1	5/60	2
Medical Students		Experience A				
		Clinical	25	1	5/60	2
		Experience B				
Training of	1	Key Informant	16	1	15/60	4
Trainers		Interview			, , , ,	
Participants/		Key Informant	15	1	20/60	5
Regional State		Interview		_		-
Training		Key Informant	10	1	15/60	3
Partners/		Interview			15,50	
	I		I .	_I	L	1

Advisory	Great Lakes					
Committee	RTC					
Members	1010					
Training of	-	Harvard	100	1	1/60	2
Trainer		Minute	100	_	1,00	
Participants		Feedback				
Staff and	-	Training	180	1	2/60	6
Training of		Activity	100	_	2,00	
Trainer		Reporting				
Graduates		(TARF)				
Academic	Midwest RTC	Knowledge Pre	1080	1	7/60	126
Faculty/	Midwebe Rie	Knowledge IIC	1080	1	7/60	126
Health		Post	1000	_	7,00	120
Professionals/		Knowledge	1080	1	7/60	126
Professionals/		Assessment 3	1000	_	7700	120
Health		mo Follow-up				
Profession		Event Eval	1110	1	5/60	93
Students		Evenc Evar	1110		3700	95
Health	-	Continuing	250	1	5/60	21
Professionals		Education	230	_	3,00	
		Event, Pre				
		Continuing	250	1	5/60	21
		Education			3, 33	
		Event, Post				
		Continuing	250	1	5/60	21
		Education			3, 33	
		Event, 3 mo				
		Follow-up				
		Modified	75	1	10/60	13
		Index, Pre			, , , , ,	
		Modified	75	1	10/60	13
		Index,3 mo			, , , , ,	
		Follow-up				
Academic Faculty		Utilization	50	1	5/60	4
1		of FAS/FASD			,	
		Curriculum,				
		Pre				
		Utilization	50	1	5/60	4
		of FAS/FASD				
		Curriculum 3				
		mo Follow-up				
Medical and	Southeast	FASD Pre	500	1	10/60	83
allied health	RTC	FASD Post	500	1	15/60	125
students and		FASD 3 Mo	300	1	10/60	50
residents		Follow-up				
Total			15,640			2,658

Ron A. Otten,

Director, Office of Scientific Integrity Office of the Associate Director for Science (OADS)

Office of the Director Centers for Disease Control and Prevention

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